

Dr. Vinay Chopra
MD (Pathology & Microbiology)
Chairman & Consultant Pathologist

Dr. Yugam Chopra
MD (Pathology)
CEO & Consultant Pathologist

NAME : Mrs. SHILPA
AGE/ GENDER : 30 YRS/FEMALE
COLLECTED BY : SURJESH
REFERRED BY :
BARCODE NO. : 01521469
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1682443
REG. NO./LAB NO. : 012411260020
REGISTRATION DATE : 26/Nov/2024 10:35 AM
COLLECTION DATE : 26/Nov/2024 11:03AM
REPORTING DATE : 26/Nov/2024 12:48PM


| Test Name | Value | Unit | Biological Reference interval |
|-----------|-------|------|-------------------------------|
|-----------|-------|------|-------------------------------|


CLINICAL CHEMISTRY/BIOCHEMISTRY

UREA

| | | | |
|---|--------------------|-------|---------------|
| UREA: SERUM by UREASE - GLUTAMATE DEHYDROGENASE (GLDH) | 89.91 ^H | mg/dL | 10.00 - 50.00 |
|---|--------------------|-------|---------------|




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CREATININE

CREATININE: SERUM
by ENZYMATIC, SPECTROPHOTOMETRY

8.97^H

mg/dL

0.40 - 1.20



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POTASSIUM

| | | | |
|--|-------------------|--------|-------------|
| POTASSIUM: SERUM by ISE (ION SELECTIVE ELECTRODE) | 5.11 ^H | mmol/L | 3.50 - 5.00 |
|--|-------------------|--------|-------------|

INTERPRETATION:-

POTASSIUM:

Potassium is the major cation in the intracellular fluid. 90% of potassium is concentrated within the cells. When cells are damaged, potassium is released in the blood.

HYPOKALEMIA (LOW POTASSIUM LEVELS):-

1. Diarrhoea, vomiting & malabsorption.
2. Severe Burns.
3. Increased Secretions of Aldosterone

HYPERKALEMIA (INCREASED POTASSIUM LEVELS):-

1. Oliguria
2. Renal failure or Shock
3. Respiratory acidosis
4. Hemolysis of blood

*** End Of Report ***




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